2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED DOCUMENT # N00000003970 07 SEP 17 PH 3: 07 OXFÓRD POINTE AT CROWN COLONY CONDOMINIUM ASSOCIATION, INC. JEUNETANT OF STATE FALLAHASSEE, FLORIDA Principal Place of Business Mailing Address OMNI MGMT SCVS OMNI MGMT SCVS 27499 RIVERVIEW CENTER 27499 RIVERVIEW CENTER BONITA SPRINGS, FL 34134 BONITA SPRINGS, FL 34134 08062007 Chg-NP CR2E037 (12/06) Applied For FEI Number 59-3724284 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent OMNI MANAGEMENT SERVICES 27499 RIVERVIEW CENTER, STE 134 BONITA SPRINGS, FL 34134 City 8. The above framed entity submits this statement for the purpose of changing its registered office or register or both, in the State of Florida. I am familiar the obligat f regist red agent. 9/13/07 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make check payable to Amended AR is \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 PD ☐ Delete TITLE TITLE ☐ Change □ Addition TIERNEY, JOHN NAME NAME 200109595652 8976 GREENWICH HILL WAY #102 STREET ADDRESS STREET ADDRESS 09/18/07--01069--012 **61.25 CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition TITLE SAPER, LINDA NAME NAME 8980 GREENWICH HILLS WAY #101 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CHY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME JOINER, LINDA 8980 GREENWICH HILLS WAY 202 STREET ADDRESS STREET ADDRESS NAPLES, FL 34108 CITY-ST-7IF CITY-ST-ZIP ■ Addition Delete EVANS, CAROL NAME NAME 8970 GREENWICH HILLS WAY #201 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME SIEMENAS, LINDA NAME STREET ADDRESS 8980 GREENWICH HILLS WAY #102 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-ZIP ☐ Change ☐ Delete TITLE ■ Addition TITLE BLECHER, JEFFREY NAME NAME STREET ADDRESS 8980 GREENWICH HILLS WAY #201 STREET ADDRESS CITY-ST-ZIP FORT MYERS, FL 33908 CITY-ST-7IP I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 91*131<u>07</u>* SIGNATURE: NTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone